

POSITION	INITIALS	ED NO.	DATE
FEES DETERMINATION	<i>HS</i>		10/5/99
O.I.P.E. CLASSIFIER		59	11/12
FORMALITY REVIEW		10/08	10-18-99

## INDEX OF CLAIMS

✓ Rejected      N Non-elected  
 □ Allowed      I Interference  
 - (Through numeral) Cancelled      A Appeal  
 + Restricted      0 Objected

Claim	Final	Original	Date
1	✓	✓	1/12/99
2	✓	✓	1/12/99
3	✓	✓	1/12/99
4	✓	✓	1/12/99
5	✓	✓	1/12/99
6	✓	✓	1/12/99
7	✓	✓	1/12/99
8	✓	✓	1/12/99
9	✓	✓	1/12/99
10	✓	✓	1/12/99
11	✓	✓	1/12/99
12	✓	✓	1/12/99
13	✓	✓	1/12/99
14	✓	✓	1/12/99
15	✓	✓	1/12/99
16	✓	✓	1/12/99
17	✓	✓	1/12/99
18	✓	✓	1/12/99
19	✓	✓	1/12/99
20	✓	✓	1/12/99
21	✓	✓	1/12/99
22	✓	✓	1/12/99
23	✓	✓	1/12/99
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If more than 150 claims or 10 actions  
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